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MAR 31 2005

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7590

01/12/2005

Wendy W. Koba
 PO Box 556
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Wendy W. Koba	(Depositor's name)
Wendy W. Koba	(Signature)
3/31/2005	(Date)

04/04/2005 HVUONG2 00000028 10720372

01 FC:1504	300.00 OP
02 FC:2501	700.00 OP
03 FC:8001	6.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/720,372	11/24/2003	Margaret Ghiron	SI0-0107	4738

TITLE OF INVENTION: BEAM SHAPING AND PRACTICAL METHODS OF REDUCING LOSS ASSOCIATED WITH MATING EXTERNAL SOURCES A OPTICS TO THIN SILICON WAVEGUIDES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	04/12/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
RAHLL, JERRY T	2874	385-036000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SiOptical, Inc.

Allentown PA 18195

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 2

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- ☒ A check in the amount of the fee(s) is enclosed.
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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Wendy W. Koba

Date

3/31/2005

Typed or printed name

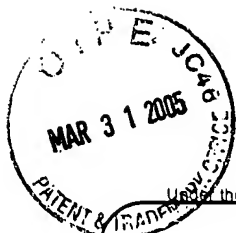
Wendy W. Koba

Registration No.

3/31/2005

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/720,372
Filing Date	11/24/2003
First Named Inventor	Ghiron
Art Unit	2874
Examiner Name	Jerry T. Rahl
Attorney Docket Number	SIO-0107

Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <i>issue fee</i> <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <i>1. Return receipt postcard</i> <i>2. Express mail cert. of mailing</i>
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Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Wendy W. Koba, Esq.		
Signature	<i>Wendy W. Koba</i>		
Printed name	Wendy W. Koba		
Date	3/31/2005	Reg. No.	30509

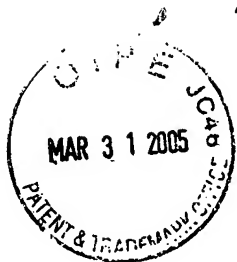
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Typed or printed name	Wendy W. Koba	Date	3/31/2005

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EXPRESS MAIL
CERTIFICATE OF MAILING

Patent Application for:

Applicants: Margaret Ghiron et al.

Atty. No: SIO-0107

Title: Beam Shaping and Practical Methods of
Reducing Loss Associated with Mating
External Sources And Optics to Thin Silicon Waveguides

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Signature: Wendy W. Koba